CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Date Received MAR 3 1 2011

STATEMENT OF ECONOMIC INTERESTS

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FAIR POVER PAGE

PRACTICES CUTIMISSION

FINANCE DEPT

| Please type or print in ink. | 3 PM 2:38 |
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| NAME OF FILER (LAST) | (FIRST) (MIDDLE) |
| lenergue | Yolanda 5. |
| 1. Office, Agency, or Court | |
| Agency Name of Shoorfield | <u> </u> |
| Division, Board, Department District, if applicable | Council member Broton |
| ► If filing for multiple positions, list below or on an attachment. | wimper |
| Agency: TAMC | Position: Ollewale |
| 2. Jurisdiction of Office (Check at least one box) | |
| ☐ State | ☐ Judge (Statewide Jurisdiction) |
| Multi-County | County of |
| X city of Granne ild | Other |
| 3. Type of Statement (Check at least one box) | |
| Annual: The period covered is January 1, 2010, through December 2010. | 31, Leaving Office: Date Left/// (Check one) |
| The period covered is, through December 3 2010. | O The period covered is January 1, 2010, through the date of leaving office. |
| Assuming Office: Date | O The period covered is, through the date of leaving office. |
| Candidate: Election Year Office sought, if of | different than Part 1: |
| 4. Schedule Summary | |
| Check applicable schedules or "None." | ➤ Total number of pages including this cover page: |
| Schedule A-1 - Investments - schedule attached | Schedule C - Income, Loans, & Business Positions - schedule attached |
| Schedule A-2 - Investments – schedule attached | Schedule D - Income - Gifts - schedule attached |
| Schedule B - Real Property – schedule attached | Schedule E - Income - Gifts - Travel Payments - schedule attached |
| -or- None - No reportable inte | erests on any schedule |
| To reportation and | - |
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| There were an recommend uniquine in property the statement. There is | nonco u |
| herein and in any attached schedules is true and complete. I acknowledg | pe this is |
| I certify under penalty of perjury under the laws of the State of Califo | ornia tha |
| Date Signed (month, day, year) | Signatu |